

RFP REGISTRATION FORM

RFP PMB-2016-31	Request For Proposals - Furnish Property Management, Maintenance and Resident Services for Federal Low-Income Public Housing Properties under Asset Management Project 49 on the Island of Oahu
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INSTRUCTIONS

Please fill out this sheet and leave original with the Contract & Procurement Office located at 1002 North School Street – Building D, Honolulu, HI. 96817 when you pick up your Request for Proposals (RFP) packet. A copy will be made for you. Take the copy with you as it contains important dates, times and information.

Read this packet carefully. If you have any questions, please call Kathy Mitchell at (808) 832-1892.

Pre-Proposal Conference / Site Inspection:	August 9, 2016, 10:30 a.m. – 11:30 a.m. Hawaii Standard Time (HST) Kauhale Nani Community Hall, 310 North Cane Street, Wahiawa, HI 96786. Site inspection to follow at approximately 11:45 a.m., HST, or at the conclusion of the Pre-Proposal Conference.
Proposal Submittal Deadline:	Sealed proposals will be received until 10:00 a.m. HST, August 30, 2016 at the HPHA – Central Files, 1002 North School Street, Building D, Honolulu, HI 96817. Electronic mail and facsimile transmissions shall not be accepted.
Notice of Award:	September 2016
Contract Start Date:	September 30, 2016, 12:01 p.m. HST

	Date: _____
Company: _____	
Address: _____	
Phone No. _____	Cell No. _____
Fax No. _____	
Email Address: _____	
Contact Person: _____	

Signature of Person Picking Up Packet

REQUIRED ATTACHMENTS:

The following must be submitted with the proposal:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Certificate of Compliance LIR #27 | <input checked="" type="checkbox"/> DCCA Certificate of Good Standing |
| <input checked="" type="checkbox"/> Wage Certificate | <input checked="" type="checkbox"/> Corporate Resolution (indicating who is authorized to sign bid documents & contracts) |

The following shall be submitted prior to start of the contract:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Certificate of Insurance(s) | <input checked="" type="checkbox"/> Valid Tax Clearance Certificate |
| <input type="checkbox"/> Other: _____ | |